

Amendment No. 1 to HB0920

Terry
Signature of Sponsor

AMEND Senate Bill No. 665*

House Bill No. 920

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Section 63-17-201(8), is amended by deleting the subdivision and substituting:

(8) "Practice of dispensing and fitting hearing instruments" includes:

(A) The evaluation or measurement of the powers or range of human hearing by means of an audiometer for the consequent selection or adaptation for sale of hearing instruments intended to compensate for hearing loss, and the appropriate instructions, consultations, suggestions, recommendations, or opinions related to this practice;

(B) Making an impression of the ear, or an ear mold; and

(C) Cerumen management in the course of examining ears by a person who holds a certification of completion of a cerumen management course, as described in § 63-17-224; and

SECTION 2. Tennessee Code Annotated, Section 63-17-201, is amended by adding the following as new subdivisions:

() "Cerumen" means a wax like secretion from glands in the external auditory canal;

() "Otolaryngologist" means a physician specialist dedicated to the care of patients with disorders of the ears, nose, throat and related structures of the head and neck, commonly referred to as ENTs;

SECTION 3. Tennessee Code Annotated, Title 63, Chapter 17, Part 2, is amended by adding the following as a new section:

63-17-223. Cerumen management.

A licensed hearing instrument specialist shall comply with the following cerumen management principles:

(1) The indications for cerumen management for a licensed hearing instrument specialist include:

- (A) Enabling audiometric testing;
- (B) Making ear impressions;
- (C) Fitting hearing protection or prosthetic devices; and
- (D) Monitoring continuous use of hearing aids;

(2) The licensed hearing instrument specialist shall refer a patient who exhibits any of the following contraindications to cerumen removal for medical consultation or medical intervention to an otolaryngologist or a licensed physician:

- (A) An age less than twelve (12) years of age;
- (B) A perforated tympanic membrane;
- (C) History of pain, active drainage, or bleeding from the ear;
- (D) Evidence of congenital or traumatic deformity of the ear;
- (E) Ear surgery within the last six (6) months;
- (F) Tympanostomy tubes, such that irrigation should not be used;
- (G) A bleeding disorder;
- (H) Actual or suspected foreign body in the ear;
- (I) Stenosis or bony exostosis of the ear canal;
- (J) Cerumen impaction that totally occludes the ear canal;
- (K) Cerumen located medial to the cartilaginous external auditory

canal; or

(L) A tympanic membrane that the licensee is unable to see;

(3) In performing cerumen removal, a licensed hearing instrument specialist shall only remove cerumen lateral to the external auditory canal using the following instruments:

(A) Cerumen loop;

(B) Cerumenolytic liquid;

(C) Irrigation, for patients with intact tympanic membranes and a closed mastoid cavity, no tympanostomy tubes, no recent ear surgery, and no recent dizziness; or

(D) Suction used lateral to the bony canal, only for patients with no recent surgery, intact tympanic membranes and no clear otorrhea;

(4) If the patient, while undergoing cerumen management that did not present contraindications, complains of significant pain, exhibits uncontrolled bleeding or a laceration of the external auditory canal, or notices the acute onset of dizziness or vertigo or sudden hearing loss, then the licensed hearing instrument specialist shall immediately stop the procedure and refer the patient to an otolaryngologist or a licensed physician;

(5) The licensed hearing instrument specialist shall maintain the following proper infection control practices:

(A) Universal health precautions;

(B) Decontamination;

(C) Cleaning, disinfection, and sterilization of multiple use equipment; and

(D) Universal precautions for prevention of the transmission of human immunodeficiency virus (HIV), hepatitis B virus, and other bloodborne pathogens, as defined by occupational safety and health standards promulgated pursuant to 29 CFR 1910;

(6) The licensed hearing instrument specialist who performs cerumen management shall maintain a case history for every patient and informed consent signed by the patient as part of the patient's records;

(7) The licensed hearing instrument specialist shall carry appropriate professional liability insurance before performing cerumen removal; and

(8) The licensed hearing instrument specialist is prohibited from requiring patients to sign any form that eliminates liability if patient is harmed.

SECTION 4. Tennessee Code Annotated, Title 63, Chapter 17, Part 2, is amended by adding the following as a new section:

63-17-224. Cerumen management course.

(a) A licensed hearing instrument specialist who engages in cerumen management under § 63-17-223, must have completed a cerumen management course approved by the International Hearing Society, the American Academy of Otolaryngology-Head and Neck Surgery, or another organization approved by the board.

The course must:

(1) Be overseen by a physician, preferably an otolaryngologist;

(2) Consist of at least six (6) hours of a participant practicing removing cerumen from an ear canal model using a variety of safe techniques; and

(3) Result in a certificate of completion and attestation of competence signed by the overseeing physician.

(b) The board is authorized to promulgate rules to effectuate the requirements of the course outlined in this section only after consultation with the board of medical examiners established at § 63-6-101. The rules must be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5.

SECTION 5. The headings in this act are for reference purposes only and do not constitute a part of the law enacted by this act. However, the Tennessee Code Commission is requested to include the headings in any compilation or publication containing this act.

SECTION 6. For rule promulgation purposes, this act takes effect upon becoming a law, the public welfare requiring it. For all other purposes, this act takes effect July 1, 2021, the public welfare requiring it, and applies to a licensed hearing instrument specialist engaging in cerumen management on or after that date.